

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☒ DRY ☐ Other _____				7. UNIT AGREEMENT NAME _____	
b. TYPE OF COMPLETION: NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____				8. FARM OR LEASE NAME Nava Jo	
2. NAME OF OPERATOR Consolidated Oil & Gas Inc.				9. WELL NO. 1-2	
3. ADDRESS OF OPERATOR P.O. Box 2038 Farmington, New Mexico				10. FIELD AND POOL, OR WILDCAT Basin Dakota	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 990' from the north line 990' from the east line of Section 2 twm 25 North Range 10 West At top prod. interval reported below _____ At total depth _____				11. SEC. T. R. M., OR BLOCK AND SURVEY Sec. 2 Twn 25 North Range 10 West NMPH	
14. PERMIT NO. _____		DATE ISSUED _____		12. COUNTY OR PARISH San Juan	
				13. STATE New Mexico	
15. DATE SPUDDED 4-30-64	16. DATE T.D. REACHED 5-17-64	17. DATE COMPL. (Ready to prod.) 5-23-64	18. ELEVATIONS (DF, REB, RT, GR, ETC.)* 6762 OL. 6774 KB.		19. ELEV. CASINGHEAD 6762
20. TOTAL DEPTH, MD & TVD 6815	21. PLUG, BACK T.D., MD & TVD 6786	22. IF MULTIPLE COMPL., HOW MANY* Single	23. INTERVALS DRILLED BY →	ROTARY TOOLS 0 to T.D.	CABLE TOOLS _____
24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 6658-6690 Basin Dakota					25. WAS DIRECTIONAL SURVEY MADE No
26. TYPE ELECTRIC AND OTHER LOGS RUN Induction Electrolog and Acoustic					27. WAS WELL CORED No
28. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	
8 5/8"	24.00#	263	12 1/4"	150 sacks reg. w/2% Ca Cl₂	
4 1/2"	10.50#	6819	7 5/8"	225 sacks 50-50 permix w/1% gel.	
				Second stage 100 sacks class "C" with 40% Diaseal.	
29. LINER RECORD				30. TUBING RECORD	
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	
31. PERFORATION RECORD (Interval, size and number) 6658-6690 6 holes per foot Total of 192 .52" holes				32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
				DEPTH INTERVAL (MD) 6658-6690	
				AMOUNT AND KIND OF MATERIAL USED Sand and water frac 60,000# of sand 1694 barrels of water.	
33.* PRODUCTION					
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or Shut In)	
		Flowing		Shut In	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.
5-30-64	3	3/4	→		
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.
160	1140	→		2348	
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) _____					
35. LIST OF ATTACHMENTS Gamma Ray, Induciton Electrolog, Acoustilog & Drilling and Completion history					
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records					
SIGNED <i>Thomas M. Bayless</i>		TITLE Area Supertendant		DATE June 9, 1964	

***(See Instructions and Spaces for Additional Data on Reverse Side)**

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be filed on this form; see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as referenced (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments, items 22 and 24. If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Seals Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report of this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES: SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES			38. GEOLOGIC MARKERS			
FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Pictured Cliffs	2103	2195	Shaley sandstone, interbedded with shale and siltstone	Pictured Cliffs	2103	+4671
Dakota	6652	6757	Fine to medium grained sandstone	Cliffhouse	3560	+3214
				Point Leeward	4506	+2106
				Gallup	5662	+1112
				Greenhorn	6496	+278
				Dakota	6652	+122